

APPLICATION DATA SHEET

Application Information

Application number::	09/939,648
Filing Date::	08/28/01
Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	2873
CD-ROM or CD-R?::	None
Number of CD disks::	None
Number of copies of CDs::	None
Sequence submission::	
Computer Readable Form (CRF)::	No
Number of copies of CRF::	None
Title::	LENTICULAR LENS SHEET AND REAR PROJECTION SCREEN
Attorney Docket Number::	DAIN:518A
Request for Early Publication::	No
Request for Non-Publication::	No
Suggested Drawing Figure::	1
Total Drawing Sheets::	14
Small Entity::	No
Latin Name::	
Variety denomination name::	
Petition included::	No
Petition Type::	None

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Licensed US Govt. Agency:: None
Contract or Grant Numbers:: None
Secrecy Order in Parent Appln.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship
Country:: Japan
Status:: Full Capacity

Given Name:: Yoshiki
Middle Name::
Family Name:: Yoshida
Name Suffix::
City of Residence:: Shinjuku-Ku
State or Province of
Residence:: Tokyo-To
Country of Residence:: Japan
Street of mailing address:: c/o Dai Nippon Printing Co., Ltd.,
1-1, Ichigaya-Kaga-Cho 1-Chome
City of mailing address:: Shinjuku-Ku
State or Province of
mailing address:: Tokyo-To
Country of mailing address:: Japan
Postal or Zip Code of
mailing address::

Given Name:: Kumpei
Middle Name::
Family Name:: Oda
Name Suffix::
City of Residence:: Shinjuku-Ku
State or Province of
Residence:: Tokyo-To
Country of Residence:: Japan
Street of mailing address:: c/o Dai Nippon Printing Co., Ltd.,
1-1, Ichigaya-Kaga-Cho 1-Chome
City of mailing address:: Shinjuku-Ku
State or Province of
mailing address:: Tokyo-To
Country of mailing address:: Japan
Postal or Zip Code of
mailing address::

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Given Name:: Hitomu
Middle Name::
Family Name:: Watanabe
Name Suffix::
City of Residence:: Shinjuku-Ku
State or Province of
Residence:: Tokyo-To
Country of Residence:: Japan
Street of mailing address:: c/o Dai Nippon Printing Co., Ltd.,
1-1, Ichigaya-Kaga-Cho 1-Chome
City of mailing address:: Shinjuku-Ku
State or Province of
mailing address:: Tokyo-To
Country of mailing address:: Japan
Postal or Zip Code of
mailing address::

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Correspondence Information

Correspondence Customer Number:: 6160

Representative Information

Representative Customer Number:: 6160

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application			

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::
Japan	219099/1998	08/03/98	Yes

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Assignee Information

Assignee name::	Dai Nippon Printing Co., Ltd.
Street of mailing address::	1-1, Ichigaya-Kaga-Cho 1-Chome
City of mailing address::	Shinjuku-Ku
State or Province of mailing address::	Tokyo-To
Country of mailing address::	Japan
Postal or Zip Code of mailing address::	

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